

UNITED STATES BANKRUPTCY COURT					
Western District of Pennsylvania					
INVOLUNTARY PETITION					
IN RE (Name of Debtor – If Individual: Last, First, Middle)			ALL OTHER NAMES used by debtor in the last 8 years (Include married, maiden, and trade names.)		
NASHIN WORLDWIDE INC.					
Last four digits of Social-Security or other Individual's Tax-I.D. No./Complete EIN (If more than one, state all.): 45-2801541					
STREET ADDRESS OF DEBTOR (No. and street, city, state, and zip code)			MAILING ADDRESS OF DEBTOR (If different from street address)		
13360 St. Clair Drive North Huntingdon, PA			Nashin Worldwide Inc. PO Box 96 East McKeesport PA		
COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS Westmoreland					
ZIP CODE 15642			ZIP CODE 15035		
LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (If different from previously listed addresses)					
CHAPTER OF BANKRUPTCY CODE UNDER WHICH PETITION IS FILED					
<input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11					
INFORMATION REGARDING DEBTOR (Check applicable boxes)					
Nature of Debts (Check one box.)		Type of Debtor (Form of Organization)		Nature of Business (Check one box.)	
Petitioners believe:		<input type="checkbox"/> Individual (Includes Joint Debtor) <input checked="" type="checkbox"/> Corporation (Includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		<input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51)(B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other Holding Corporation	
<input type="checkbox"/> Debts are primarily consumer debts <input checked="" type="checkbox"/> Debts are primarily business debts					
VENUE			FILING FEE (Check one box)		
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in the District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> bankruptcy case concerning debtor's affiliate, general partner or partnership is pending in this District.			<input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Petitioner is a child support creditor or its representative, and the form specified in § 304(g) of the Bankruptcy Reform Act of 1994 is attached. [If a child support creditor or its representative is a petitioner, and if the petitioner files the form specified in § 304(g) of the Bankruptcy Reform Act of 1994, no fee is required.]		
PENDING BANKRUPTCY CASE FILED BY OR AGAINST ANY PARTNER OR AFFILIATE OF THIS DEBTOR (Report information for any additional cases on attached sheets.)					
Name of Debtor		Case Number		Date	
N/A					
Relationship		District		Judge	
ALLEGATIONS (Check applicable boxes)				COURT USE ONLY	
1. <input checked="" type="checkbox"/> Petitioner (s) are eligible to file this petition pursuant to 11 U.S.C. § 303 (b).				FILED SEP -7 AM 1:13 U.S. DISTRICT COURT WESTMORELAND COUNTY, PA	
2. <input checked="" type="checkbox"/> The debtor is a person against whom an order for relief may be entered under title 11 of the United States Code.					
3.a. <input checked="" type="checkbox"/> The debtor is generally not paying such debtor's debts as they become due, unless such debts are the subject of a bona fide dispute as to liability or amount; or					
b. <input type="checkbox"/> Within 120 days preceding the filing of this petition, a custodian, other than a trustee receiver, or agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.					

SEP -7 AM 1:13

Name of Debtor NASHIN WORLDWIDE

Case No. _____

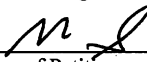
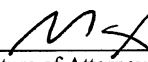
TRANSFER OF CLAIM

☒ Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents that evidence the transfer and any statements that are required under Bankruptcy Rule 1003(a).

REQUEST FOR RELIEF

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

x <u></u> Signature of Petitioner or Representative (State title) <u>Michael Sussman</u> Name of Petitioner Date Signed <u>9/5/2012</u> Name & Mailing Address of Individual Signing in Representative Capacity <u>Michael Sussman</u> <u>1730 South Federal 151</u> <u>Delray Beach FL 33483</u>	x <u></u> Signature of Attorney <u>Michael Sussman pro se</u> Name of Attorney Firm (If any) <u>1730 South Federal 151 Delray Beach FL 33483</u> Address <u>800-578-3288</u> Telephone No.
--	---

x _____ Signature of Petitioner or Representative (State title) Name of Petitioner Date Signed Name & Mailing Address of Individual Signing in Representative Capacity	x _____ Signature of Attorney Date Name of Attorney Firm (If any) Address Telephone No.
---	--

x _____ Signature of Petitioner or Representative (State title) Name of Petitioner Date Signed Name & Mailing Address of Individual Signing in Representative Capacity	x _____ Signature of Attorney Date Name of Attorney Firm (If any) Address Telephone No.
---	--

PETITIONING CREDITORS

Name and Address of Petitioner	Nature of Claim	Amount of Claim
Michael Sussman	Subscription Agreement	\$84,000
Name and Address of Petitioner	Nature of Claim	Amount of Claim
Name and Address of Petitioner	Nature of Claim	Amount of Claim
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims \$84,000

_____ continuation sheets attached

Single creditor petition, less than 5 total creditors.

Principal Officer

Shanni Snyder
PO Box 96
East McKeesport, PA 15035